

## **Massachusetts Department of Environmental Protection**

Bureau of Resource Protection - Water Management Act Program

## WMA Form H - Groundwater Hydraulic Analysis

## A. Applicant Information Name Mailing Address City State Zip Code Telephone Number Signature Date B. Pumping Test Report Submit the pumping test report as outlined in Appendix F. Consultant Name Reviewer's Name

City

Date

Telephone Number

## Important:

When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





City

Signature

Telephone Number